TELECOPIER COVER SHEET

RECEIVED CENTRAL FAX CENTER

JUN 07 2006

June 7, 2006

From: Estella Pineiro Patent Administrator 818-493-2251		
ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221		
Telecopier: 818/362-4795		
Number of pages being sent: 19 (including cover page)		

PLEASE DELIVER TO EXAMINER MALAMUD, Art Unit 3766. Thank you.

JUN 0 7 2006 PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Mark W. Kroll

Confirmation No.: 2626

Serial No.:

10/657,878

Examiner:

Deborah Leslie Malamud

Filed:

09/08/2003

Art Unit:

3766

Docket No.:

A03P1062US04

For:

SYSTEM AND METHOD FOR PROVIDING PREVENTIVE OVERDRIVE PACING AND ANTITACHYCARDIA PACING USING AN IMPLANTABLE CARDIAC STIMULATION DEVICE

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith for filing are the following documents:

- X Amendment and Request for Reconsideration
- X (2) Terminal Disclaimers
- X First Supplemental Information Disclosure Statement
- X PTO-1449 (copies of cited references not enclosed)
- X Transmittal Letter, Fee and Cert. of Mailing

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

June 7, 2006

Date

PATENT

TEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADO'L CLAIMS FILED	LARGE ENTITY	\$ FEE
A	TOTAL CLAIMS FEE	13	20	0	X \$ 50	\$ 0
В	INDEPENDENT CLAIMS FEE	3	3	0	X \$200	0
С	MULTIPLE- DEPENDENT				X \$ 360	0
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160					
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee- Declaration; Petitions; Information Disclosure Statement, Terminal Disclaimer, etc.) 2 Terminal Disclaimers Specify: First Supplemental Information Disclosure Statement					
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D. and E)					

SJM CRMD_LEGAL DEPT.

Charge Deposit Account No. 16-0068 X the amount of

\$560** A copy of this letter is enclosed.

- The Commissioner is hereby authorized to charge payment of the following fees Х associated with this communication or credit any overpayment to Deposit Account No. 16-0068
 - X Any additional filing fees required under 37 CFR 1.16.
 - Any patent application processing fees under 37 CFR 1.17.
- The Commissioner is hereby authorized to charge payment of the following fees X during the pendency of this application or credit any overpayment to Deposit Account No.

16-0068

- Any patent application processing fees under 37 CFR 1.17.
- X X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date: 6/7/06

Attorney for Applicants Reg. No. 43,179 818-493-3157

CUSTOMER NUMBER: 36802